



ACTIVITY GRANT APPLICATION FOR DVD

YOUR Participation will help:

- Individuals gain awareness about addiction
- Enhance the health of the community

This grant is being offered to assist participants with a DVD of the 90 minute documentary and materials needed for the success of activities and events involving the HBO Addiction project.

Contact Information

Please print all information.

☐ Mr. ☐ Mrs. ☐ Ms.

First Name _____ Middle Initial _____

Last Name _____

Address _____ Apt. No. _____

City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____ Email _____

Affiliation or Organization to receive DVD if approved _____

Address where activity or event will take place _____ Apt No. _____

City _____ State _____ Zip _____

Telephone number where activity or event is to be held _____

Date of Activity or Event _____ Time _____

Do you know of another group who might be interested in viewing the 90-minute HBO documentary "Addiction" _____

GRANT INFORMATION

☐ I would like to show the DVD at the following:

- ☐ Faith Based Teach In
- ☐ Education Programs
- ☐ House Parties
- ☐ Town Hall Meeting
- ☐ Other _____

After your group views the HBO documentary "Addiction, Communities Take Action" this grant requires that you report back to NCADD with the following information:

- ☐ Number of people that attended your screening
- ☐ Your review and the reaction of your guests
- ☐ How this program could be improved

Please fax completed application to 313 369-5415 • For Further Information Please Contact Veronica Singleton at 313 369-5411

Thank you for interest

It is Greatly Appreciated!

Project Partners: NCADD-GDA, Detroit Recovery Project, SHAR, INC., Detroit Rescue Mission Ministries, St. John/Brighton Hospital, SEMCA, MASACA, MACMHB, Michigan Department of Community Health, Empowerment Zone Coalition, Latino Family Services, Catholic Social Services, Elmhurst House, New Creations Community Outreach